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FAX TRANSMISSION

DATE: September 11, 2008

PTO IDENTIFIER: Application Number 10/647,980-Conf. #3076
Patent Number

Inventor: Karl-Heinz Pitsch

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: FULBRIGHT & JAWORSKI L.L.P.

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PAGES (Including Cover Sheet): 28

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Request for Continued Examination Transmittal (1 page)
First Preliminary Amendment
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PTO/30/17 (10-07)
Approved for use through 09/30/2010. OMB 0551-0032
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FEE TRANSMITTAL

For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **010.00**

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Complete if Known

Application Number	10/647,900-Conf. #3078
Filing Date	August 26, 2003
First Named Inventor	Karl Heinz Pitsch
Examiner Name	Not Yet Assigned
Art Unit	3627
Attorney Docket No.	NY-WELLA 204-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 50-0624 Deposit Account Name: Fulbright & Jaworski L.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	10	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

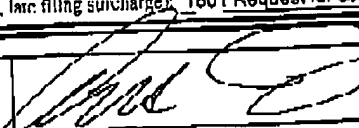
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

4. OTHER FEE(S)

Non-English Specification: \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 CFR 1.103) **010.00**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,657	Telephone	(212) 318-3359
Name (Print/Type)	G. Andrew Im	Date	September 11, 2008		

65272402.1

PI O/SB/07 (08-04)
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Application No. (if known): 10/647,980

Attorney Docket No.: NY-WELLA 201-US

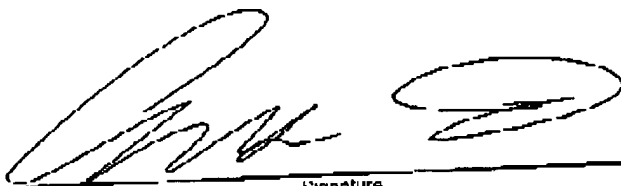
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